

Centers for Disease Control and Prevention

Fiscal Year (FY) 2013 Grants Funding Data

Frequently Asked Questions

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Q: What is the purpose of the CDC Grant Funding Profiles tool?

A: The Centers for Disease Control and Prevention (CDC) is increasing its efforts to provide our partners and the public with funding and other grants data. The CDC Grant Funding Profiles tool was launched on February 17, 2011 and contains data for fiscal year (FY) 2010 through 2013. The tool provides quick access to information on CDC funding provided to recipients in states, the District of Columbia, and territories to address issues of public health importance. These investments include funding provided to state and local health departments, universities, and other public and private agencies for a variety of public health programs.

Q: What updates did CDC make to the funding tool for FY2013?

A:

- CDC added the following to the tool:
 - FY2013 funding data and jurisdictional profiles
 - Updated 2013 "About the Data" file, "What's New" file, "FAQs," and other user guides
 - CDC revised its approach to categorizing the data in FY13—specifically, by CDC budget line versus subject area or focus of the funding—so that the data is organized by which CDC appropriation account was used to make the investment. This affected where individual continuing projects fell within the data set and changes in some categories and subcategories.

Q: Were any changes made to the parameters of the data for FY2013?

A: Yes. CDC revised its approach to categorizing the data in FY13—specifically, by CDC budget line versus subject area or focus of the funding—so that the data is organized by which CDC appropriation account was used to make the investment. This affected where individual continuing projects fell within the data set and changes in some categories and subcategories.

Q: What are the major factors that account for differences in funding among jurisdictions?

A: These data are useful in describing in general the variation in CDC funding by state, DC, territory, and funding category. However, caution should be used in interpreting these variations. Several of the reasons for variations are

- Eligible grantees in states or territories do not apply for every funding opportunity
- Most federal funding is awarded via a competitive or merit-based process. Not all states or territories that apply are funded for every program.
- Some funding is allocated according to a pre-set formula (such as per capita allocation or a need-based funding allocation). Sometimes these allocation formulas are specified by law. For example, the allocation of funds under the Vaccine for Children program is mandated by the Omnibus Budget Reconciliation Act of 1993.
- CDC has many different grant types with differing application eligibility and award criteria, such as population disease burden, per capita formula-based, competitive based on proposal merit, non-competitive, etc.

- Awards made to an entity will typically reflect the geographic location of the entity's official business or billing address such as a State capitol for a State government award. The awards therefore will not reflect the actual geographic application of the funds by the grantee in carrying out the purpose of the grant.
- CDC makes awards to various national associations that carry out national public health programs that have nationwide impact; however, the awards will be reflected in the geographic jurisdiction of the association's main office.

Q: What factors should be taken into consideration when comparing data across fiscal years?

A: There may be variation across years due to changes in where a program/activity resides in CDC's organizational and budget structure. Funding sources linked to a particular program/activity also may vary year-to-year. Therefore, it is possible for a multi-year project to fall into one category or sub-category one year and into another the next. Funding categories may be added or deleted as CDC's budget changes year to year (e.g., funding categories are deleted because their shorter-term funding sources expire). This makes 1:1 comparisons of one year's set of projects to another year's set of projects under each category or sub-category a challenge. In addition,

Also, in FY2013, CDC revised its approach to categorizing the data in FY13—specifically, by CDC budget line versus subject area or focus of the funding—so that the data is organized by which CDC appropriation account was used to make the investment. This affected where individual continuing projects fell within the data set and changes in some categories and subcategories. Secondly for FY2013, in accordance with the Budget Control Act of 2011, a series of spending cuts, called sequestration, cancelled approximately \$85 billion in budgetary resources across the Federal government for the remainder of the Federal fiscal year. For information about the impact of sequestration on CDC activities, please see [Sequester Impacts](#) and [FAQs](#).

Q: Through what mechanisms does CDC award grants to states and territories?

A: There are three mechanisms for awarding grant funds: Block Grants, Mandatory Grants, and Competitive/Discretionary grants. Each grantee receives allocated funds by formula through Block Grants. Mandatory Grants are grants that a Federal agency is required by statute to award if the recipient (usually a State, Territory, or Tribe) submits an acceptable State Plan or application and meets the eligibility and compliance requirements of the statutory and regulatory provisions of the grant program. Discretionary/competitive grants are grants that permit the Federal Government, according to specific authorizing legislation, to exercise judgment ("discretion") in selecting the applicant/recipient organization, through a competitive grant process.

Q: What are the average characteristics of the grants competitive process?

A: CDC receives tens of thousands of proposals in response to competitive Funding Opportunity Announcements (FOAs) each year for health, research, education and training projects, of which approximately 25% are funded. The grant funding process is highly competitive and involves multiple steps. First, an initial screening of an application is conducted to ensure it provides adequate information and complies with the requirements set forth in the agency's funding opportunity announcement. After the initial screening is complete, the application is submitted to an independent panel of peers or experts, a standing review committee, or a group of field readers for review in accordance with the evaluation criteria included in the FOA. The review groups are made up of qualified subject matter experts with in-depth knowledge of program issues directly related to the agency's mission. The reviews are fair, equitable, timely, and conducted in a manner free of bias. Once the application review is complete, written recommendations are provided to program management staff and the agency's leadership, who make the final determination regarding funding. Funds for competitive grants are not allocated; they are awarded based on the merit of each application.

The results of any FOA can be queried by contacting the CDC Grants Management Officer listed in the announcement at <http://www.grants.gov>. The grants award process is inherently transparent if applicants avail themselves of the resources offered by CDC. Applications must be well written and responsive to the subject FOA. Guides to writing grant applications are widely available on the Internet. For an example, visit "Grant Writing Guidance and Tips" on CDC's website at <http://www.cdc.gov/stltpublichealth/GrantsFunding/grant-writing.html>.

Q: Where can I find more information on CDC's budget and funding opportunities?

A: More information on the CDC budget and grantee information can be found on the following sites:

- CDC Office of the Chief Financial Officer - <http://www.cdc.gov/fmo/>
- CDC's Procurement and Grants Office – <http://www.cdc.gov/about/business/funding.htm>